GAU 2811

PTO/SB/21 (08-00) Approved for use through 10/31/2002. OMB 0651-0031 Please type a plus sign (+) inside this box -> |+| U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE Inder the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a velid OVB control number. JUL 23 200 **Application Number** 09/448.884 **TRANSMITTAL** Filing Dat November 24 **FORM** Sharp, Joelle First Named Inventor TRADEM (to be used for all correspondence after initial filing) Group Art Unit 2811 Steven Loke **Examiner Name** Total Number of Pages in This Submission 3 Attorney Docket Number 018865003600 ENCLOSURES (check all that apply) After Allowance Communication to Assignment Papers Fee Transmittal Form (for an Application) Group Appeal Communication to Board of Fee Attached Drawing(s) Appeals and Interferences Appeal Communication to Group Amendment / Response Licensing-related Papers (Appeal Notice, Brief, Reply Brief) Petition Routing Slip (PTO/SB/69) After Final Proprietary Information and Accompanying Petition Petition to Convert to a Status Letter Affidavits/declaration(s) Provisional Application Power of Attorney, Revocation Other Enclosure(s) Extension of Time Request Change of Correspondence Address (please identify below): **Terminal Disclaimer** RESPONSE TO RESTRICTION Express Abandonment Request REQUIREMENT; Return Postcard Request for Refund Information Disclosure Statement CD, Number of CD(s) The Commissioner is authorized to charge any additional fees to Certified Copy of Priority Deposit Account 20-1430. Remarks Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Townsend and Townsend and Crew LLP Firm and William E. Winters Reg No. 42,232 Individual name Signature Date 01 CERTIFICATE OF MAILING I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date:

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SF 1247643 v1

Sherry Barton

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Typed or printed name

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July 17, 2001

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TOTAL AMOUNT OF PAYMENT

## FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

(\$) 0

Complete if Known							
Application Number	09/448,884 RECEIVED						
Filing Date	November 24, 1999 JUL 26 2001						
First Named Inventor	Sharp, Joelle						
Examiner Name	Steven LTECHNOLOGY CENTER 2800						
Group Art Unit	2811						
Attorney Docket No.	018865-003600US						

METHOD OF PAYMENT							FEE CALCULATION (continued)							
The Commissioner is hereby authorized to charge							3. ADDITIONAL FEES							
1. 🖾		indicate	d fees	and credit a	any over	paymen	ts to:		Large	Entity	Small	Entity		
Deposit Account Number									Fee	Fee	Fee	Fee	Fee Description	Fee
		20-1430						Code	(\$)	Code	(\$)	·	Paid	
		20 1-	20-1430						105	130	205	65	Surcharge - late filing fee or oath	
Deposit Account Townsend and Townsend and Crew LLP							127	50	227	25	Surcharge - late provisional filing fee or cover sheet.			
							139	130	139	130	Non-English specification			
							147	2,520	147	2,520	For filing a request for reexamination			
☐ Charge Any Additional Fee Required     ☐ Under 37 CFR 1.16 and 1.17     ☐ Applicant claims small entity status.     See 37 CFR 1.27									112	920°	112	920*	Requesting publication of SIR prior to Examiner action	
									113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
2. Payment Enclosed:									115	110	215	55	Extension for reply within first month	
								116	390	216	195	Extension for reply within second	<del></del>	
☐ Check ☐ Credit card ☐ Money ☐ Other								- 1					month	
Order									117	890	217	445	Extension for reply within third month	
FEE CALCULATION  1. BASIC FILING FEE								118	1,390	218	695	Extension for reply within fourth month		
i	Entity :		ntity						128	1,890	228	945	Extension for reply within fifth month	
_	•			Fee Descri	ntion				119	310	219	155	Notice of Appeal	
		Code (\$			puon		Fee Paid		120	310	220	155	Filing a brief in support of an appeal	
101	710 2	201 35	55 l	Utility filing	fee	Γ		7 I	121	270	221	135	Request for oral hearing	
			30 l	Design filing	g fee			11	138	1,510	138	1,510	Petition to institute a public use proceeding	
				Plant filing f		-		<b>-</b>	140	110	240	55	Petition to revive – unavoidable	
				Reissue filir	-	-		-l l	141	1,240	241	620	Petition to revive – unavoidable  Petition to revive – unintentional	
114 150 214 75 Provisional filing fee				142	1,240	242	620							
SUBTOTAL (1) (\$)								ıІ	143	440	242	220	Utility issue fee (or reissue)	
300101AL(1) (3)									143				Design issue fee	
2. EXTRA CLAIM FEES									600	244	300	Plant issue fee		
				Extra	Fee fro	m	Fee		122	130	122	130	Petitions to the Commissioner	<b></b>
Total Claims	23	23**		Claims 0 )	below \$18	=	Paid \$0	3	123	50	123	50	Petitions related to provisional applications	
Independent Claims	5	-5**	= 0	,	\$80	=	\$0	]	126	180	126	180	Submission of Information Disclosure Stmt	
Multiple Dependent	L		_		<b>,</b>	<u> </u>		j	581	40	581	40	Recording each patent assignment per property (times number of properties)	
Large Entity Small Entity Fee Fee Fee Fee Fee Fee Fee Fee Fee						146	710	246	355	Filing a submission after final rejection (37 CFR § 1.129(a))				
Code	(\$)	Code 203	( <b>\$</b> )	Fee Des	-	of 20		ı	149	710	249	355	For each additional invention to be examined (37 CFR § 1.129(b))	
103 18 203 9 Claims in excess of 20 102 80 202 40 Independent claims in excess of 3														
102 80 202 40 Independent claims in excess of 3 104 270 204 135 Multiple dependent claim, if not paid						179	710	279	355	Request for Continued Examination (RCE)				
** Poissue independent daims over				169	900	169	900	Request for expedited examination						
109 80 209 40 Reissub independent daints over						of a design application								
110 18 210 9 ** Reissue claims in excess of 20 and over original patent						۱ ا	Other fee (specify)  The Commissioner is authorized to charge any additional fees to							
						the above noted Deposit Account.								
**or number previously paid, if greater; For Reissues, see above							·	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)						
**or numbe	er previou	ısıy paid, if g	greater;	For Reissue	es, see ab	ove								

SUBMITTED BY Complete (if applicab											
Name (Print/Type)	William E. Winters	Registration No. (Attorney/Agent)	42,232	42,232 Telephone 415-		15-576-0200					
Signature	C' ME			Date	07/17/01						
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